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CONFIRMATION NO. 4511

Bib Data Sheet

SERIAL NUMBER 10/643,513	FILING DATE 08/19/2003  RULE	CLASS 607	GROUP ART UNIT 3762	ATTORNEY DOCKET NO. 279.494US2
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CON of 09/839,123 04/20/2001 PAT 6,618,617  
*Cltz 8/23/04*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
*none Cltz 8/23/04*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 11/13/2003**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 3	TOTAL CLAIMS 38	INDEPENDENT CLAIMS 5
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35 USC 119 (a-d) conditions met  
☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged  
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**TITLE**  
 Delay to therapy following patient controlled atrial shock therapy request

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